

8871

**Political Organization
Notice of Section 527 Status**

OMB No. 1545-1693

Part I General Information

1 Name of organization

CREDIBLE VOICES, INC.

Employer identification number

46 - 3371734

2 Mailing address (P.O. box or number, street, and room or suite number)

c/o MBS, Inc. P.O. Box 10189

City or town, state, and ZIP code

Brooksville, FL 34603 - 0189

3 Check applicable box: ☒ Initial notice ☐ Amended notice ☐ Final notice

4a Date established

08/05/2013

4b Date of material change

08/08/2013

5 E-mail address of organization

MBSINC1979@aol.com

6a Name of custodian of records

Mark C. Johnson

6b Custodian's address

c/o MBS, Inc. P.O. Box 10189

Brooksville, FL 34603 - 0189

7a Name of contact person

Mark C. Johnson

7b Contact person's address

c/o MBS, Inc. P.O. Box 10189

Brooksville, FL 34603 - 0189

8 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number

c/o MBS, Inc. P.O. Box 10189

City or town, state, and ZIP code

Brooksville, FL 34603 - 0189

9a Election authority

FL

9b Election authority identification number

N13000006979

Part II Notification of Claim of Exemption From Filing Certain Forms (see instructions)

10a Is this organization claiming exemption from filing Form 8872, Political Organization Report of Contributions and Expenditures, as a qualified state or local political organization? Yes ☒ No ☐

10b If 'Yes,' list the state where the organization files reports: FL

11 Is this organization claiming exemption from filing Form 990 (or 990-EZ), Return of Organization Exempt from Income Tax, as a caucus or associations of state or local officials? Yes ☐ No ☒

Part III Purpose

12 Describe the purpose of the organization

Political Action Committee (PAC)

Part IV List of All Related Entities (see instructions)

13 Check if the organization has no related entities

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14a Name of related entity

14b Relationship

14c Address

Part V List of All Officers, Directors, and Highly Compensated Employees (see instructions)

15a Name

15b Title

15c Address

Mark C. Johnson

President/VP
President/Secretary/Treasurer

c/o MBS, Inc. P.O. Box 10189
Brooksville, FL 34603 - 0189

Under penalties of perjury, I declare that the organization named in Part I is to be treated as a tax-exempt organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that I am the official authorized to sign this report, and I am signing by entering my name below.

Mark C. Johnson

08/08/2013

**Sign
Here**



Name of authorized official



Date
